

# DOCTORS MEDICAL CENTER MANAGEMENT AUTHORITY

**Doctors Medical Center Management Authority,  
JPA Board**

**Wednesday, May 26, 2010 – 3:00 pm  
Doctors Medical Center - Auditorium  
2000 Vale Road, San Pablo, CA 94806**

*Governing Board*

*Supervisor John Gioia, Chair  
Stephen Arnold, M.D.*

*Pat Godley  
Supervisor Federal Glover  
Bill Walker, M.D.  
Beverly Wallace  
Eric Zell*

## **AGENDA**

1. Call to Order and Roll Call
2. Approve Minutes of Board Meeting of April 28, 2010
3. Public Comment  
*[At this time persons in the audience may speak on any items not on the Agenda which are within the jurisdiction of the Doctors Medical Center Management Authority.]*
4. Quality Report
5. Presentation and Acceptance of the April 2010 Financial Statements
6. CEO Report

### **Closed Session**

7. Conference with Labor Negotiators (pursuant to Government Code Section 554957.6)  
Agency Negotiators: David Ziolkowski, Chief Operating Officer: California Nurse Association
8. Personnel Matters: Vice President, Human Resources

### **Open Session**

9. Report of Reportable Action(s) Taken During Closed Session, if any.
10. Adjournment

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## MINUTES – 4/28/10

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Tab 2

# DOCTORS MEDICAL CENTER MANAGEMENT AUTHORITY

Doctors Medical Center Management Authority  
Governing Board Meeting  
April 28, 2010 – 3:00 pm  
Doctors Medical Center - Auditorium  
2000 Vale Road, San Pablo, CA 94806

Governing Board  
Supervisor John Gioia, Chair  
Supervisor Federal G. Glover  
Pat Godley  
Stephen Arnold, M.D.  
Bill Walker, M.D.  
Beverly Wallace  
Eric Zell

## Minutes

### **1. Call to Order and Roll Call – 3:10 p.m.**

Quorum was established; roll was called.

#### *Voting Members:*

Beverly Wallace  
Stephen Arnold, M.D.  
Bill Walker, M.D.  
Eric Zell  
Pat Godley

*Excused Absence:* Supervisor John Gioia, Chair  
Supervisor Federal D. Glover

### **2. Approval of Minutes - Board Meeting of March 24, 2010**

*The motion made by Dr. Walker and seconded by Ms. Wallace to approve the minutes of the March 24, 2010 Board meeting passed unanimously.*

### **3. Public Comments**

The following nurses expressed concern about the shift change (which CAN nurses voted for) and its effect on nurses' personal lifestyle and traveling requirements. They also commented the lack of a 12-hour shift affected nurses' ability to render quality care and the ongoing nurses' contract negotiations:

Rosa Cabrera – Representative from the California Nurses Association  
Kim Bagby, ER  
Tiffany Lightfoot, ER  
Charlene Arrington, MICU  
Tammi Roncskevitz, Same Day Surgery  
Chandra Parker, 5<sup>th</sup> Floor  
Less McTire, ER  
Jim Beaver, ER

Ms. Cabrera read a letter from Mary Small, R.N. and Union Member, who cannot make it to the meeting.

#### **4. Quality Report**

George Wenner, Quality Director, reported that the hospital-wide Performance Improvement Committee that was established held its first meeting on April 1<sup>st</sup>. The composition of this committee includes staff, managers, physicians and board members. Committee meetings will be scheduled on days that will work for the board members.

He provided the board members with a template of a Department Specific Performance Improvement Plan, making performance improvement more of a department function. Each department will complete this form and the completed department performance improvement plans will be brought back to the board.

As a follow up to a report he made during the February Board meeting regarding pressure wounds, Mr. Wenner provided the board with data on Hospital Acquired Conditions to show the progress DMC has made thus far. Data provided showed none during the last quarter of the year.

Additionally, 2009 ORYX compliance data for appropriateness of care for the following core measures were presented:

AMI (Heart Attack) – 80% compliance in January 2010

PNA (Pneumonia) – 50% compliance in January 2010

CHF (Heart Failure) – 48% compliance in January 2010; work still needs to be done on capturing discharge medication through medication reconciliation.

SCIP (Surgical Infection Prevention) – 40% compliance in January 2010; Medical Records needs to work on capturing correct data.

Mr. Wenner reported that plans of correction for the 7 citations DMC received during the last Joint Commission Survey were completed and submitted to the State. DMC is at 97% threshold for full accreditation during the months of January, February, March and April.

#### **5. Presentation and Acceptance of the March 2010 Financial Statements**

Richard Reid, CFO, reported March 2010 net income was a gain of \$1.2 million on a budget of \$1.7 million; case mix adjusted average length of stay decreased to 3.57 days and the average daily census was 98. He reported that the total cash balance is \$13.7 million and there are 33 days of cash on hand.

On April 21<sup>st</sup>, Mr. Reid and David Ziolkowski, COO, held their first operational meeting and established three teams that are charged with different operational improvement assignments: 1) Salary; 2) Revenue Enhancement; and 3) Other Costs. Mr. Reid and Mr. Ziolkowski will co-chair each team. Each team will come up with an action plan to help recover the \$2 million deficit. Mr. Reid indicated that he would report back to the board the result of this endeavor each month.

The new coding system was fully implemented in March, which resulted in a more consistent coding and more revenue captured.

*The motion made by Ms. Wallace and seconded by Mr. Godley to accept the financials for March 2010 passed unanimously.*

**6. Ingram & Associates: Approve and Authorize CFO to execute on behalf of DMC a contract with vendor to provide self-pay collection services**

Rick Reid, CFO, sought approval and authorization to execute on behalf of DMC a contract with Ingram & Associates to provide self-pay collection services at the rate of 9%. DMC received 8 bids for this contract and Ingram and Associates is among three companies that were interviewed. The estimated annual cost is \$90,000 with an additional cash collection of \$1,000,000. The term of the contract will be changed from three years to annual as requested by board members.

*The motion made by Mr. Godley and seconded by Ms. Wallace to approve and authorize CFO to execute on behalf of DMC an annual contract with Ingram & Associates to provide self-pay collection services at a rate of 9% passed unanimously.*

**7. Keenan & Associates: Approve and authorize the CFO to execute on behalf of DMC a two-year extension to the agreement and provide employee benefit consulting services**

Rick Reid, CFO, sought approval and authorization to execute on behalf of DMC a two-year extension to the agreement between DMC and Keenan and Associates to provide employee benefit consulting services. The financial impact for two years is \$180,000, which is paid out of the operating budget.

*The motion made by Ms. Wallace and seconded by Mr. Godley to approve and authorize CFO to execute on behalf of DMC a two-year extension to the agreement between DMC and Keenan and Associates to provide employee benefit consulting services passed unanimously.*

**8. Medco Health Solutions: Recommendation to the District Board Approval of Contract with Vendor for Employee Pharmacy Benefits**

Rick Reid, CFO, sought JPA recommendation to District Board approval of contract with Medco Health Solutions to provide an integrated drug program for DMC employees and their dependents with an effective date of August 1, 2010.

The prescription drug plan by Medco will provide the employees with an enhanced drug benefit over the current vendor. There is no reduction of services to the employees. The benefit will be enhanced via increased cost savings to the employee with a more robust mail order program and better care management available through Medco dedicated care teams.

There were no reportable actions taken.

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# FINANCIALS

## APRIL 2010

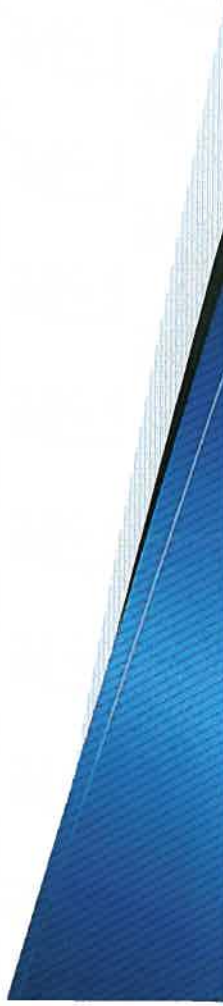
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Tab 5



# Board Presentation

## April 2010 Financial Report







## April 2010 Executive Report

Doctors Medical Center had a Net Income of \$1,635,000 in the month of April. As a result, net income was over budget by \$122,000 due to higher net patient service revenue. Year to date, net income is \$4,066,000 on a budget of \$4,833,000 or \$767,000 under budget. This is an improvement from March of \$122,000.

The Year to Date Operating Loss through April is \$1,956,000. The management team has implemented an action plan to recover from the first quarter's budget deficit. Management has put together three action plan teams that are focusing on revenue enhancements, salary costs and other costs. The teams have identified opportunities of over \$2,000,000 in new revenue and costs savings.

The following are the factors leading to the April Net Income variance:

<b><u>Net Income Factors</u></b>	<b><u>Over / (Under)</u></b>
<b>Net Patient Revenue</b>	
Self Pay Inpatient Volume	(\$105,000)
Outpatient Volume	(\$115,000)
Payer rate improvements	\$755,000
<b><u>Expenses</u></b>	
Supplies	(\$266,000)
Purchased Services	(\$110,000)

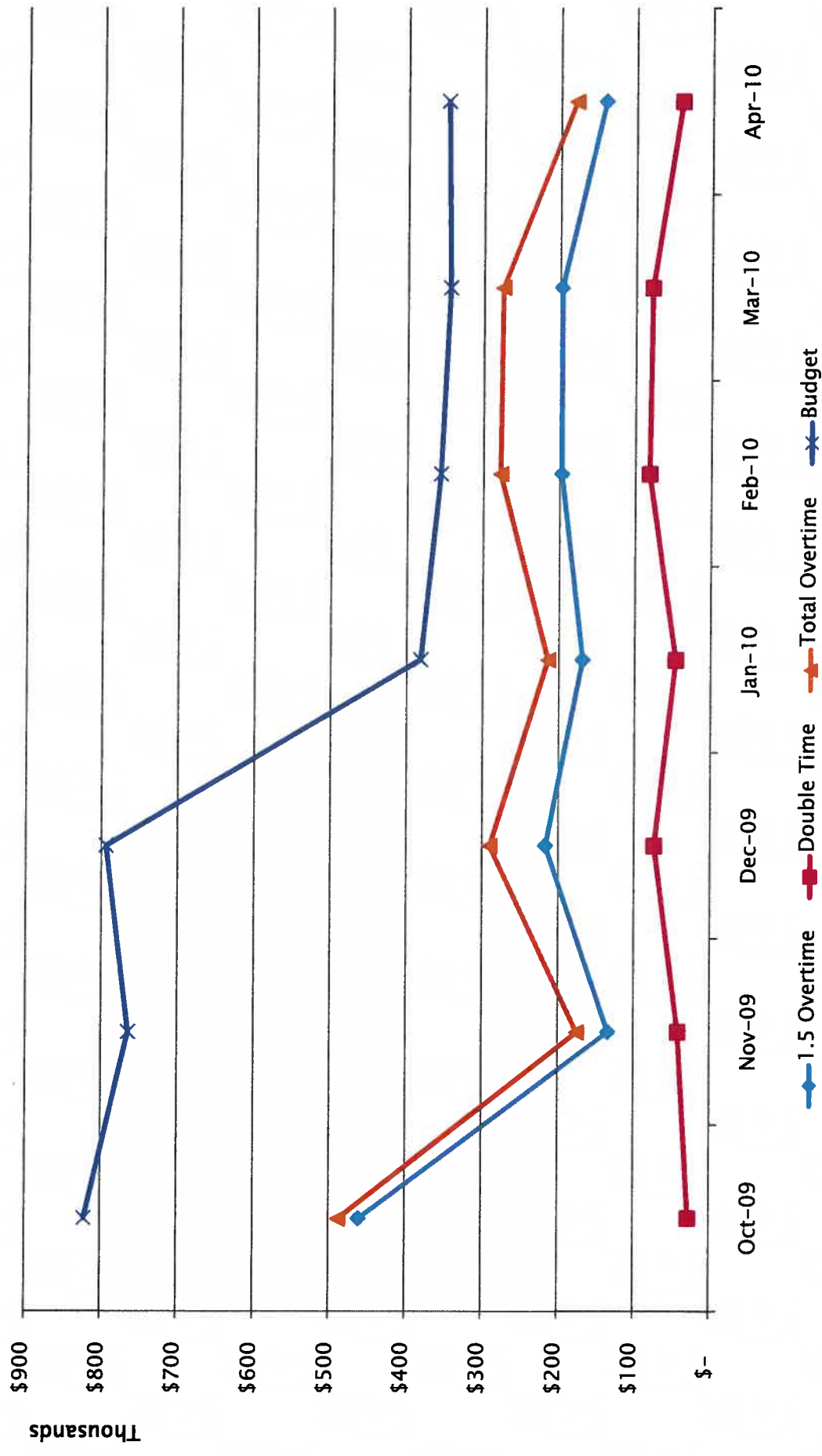
Net patient revenue was over budget by \$471,000. This variance was due to better payment rates from HMO and government payers than what was anticipated in the budget. These rates are better than expected because the average charge per case is \$2,156 lower than budgeted. The lower utilization of ancillary services is in Respiratory Therapy, EKG, CT and Laboratory. This lowers our contractual adjustments because a majority of the inpatient reimbursement is a fixed payment per case and is not dependent on charges. These payment rates were previously updated quarterly. DMC is implementing a new software system that will allow for more timely review of the payment rates.

Gross outpatient charges were under budget in April 4.5%, resulting in lower reimbursement of \$115,000. Self pay continues to be higher than budgeted resulting in additional charity care and bad debt allowances of \$105,000.

Supplies were over budget by \$266,000 in April. The increase was due to higher volume of surgical implants and pacemakers. Both were due to higher procedural volume.

Purchased Services was over budget \$110,000. The timing of repairs and maintenance bills were \$29,000 and dialysis fees were \$63,000 over budget for April.

# RN Overtime - Oct 09 to April 10



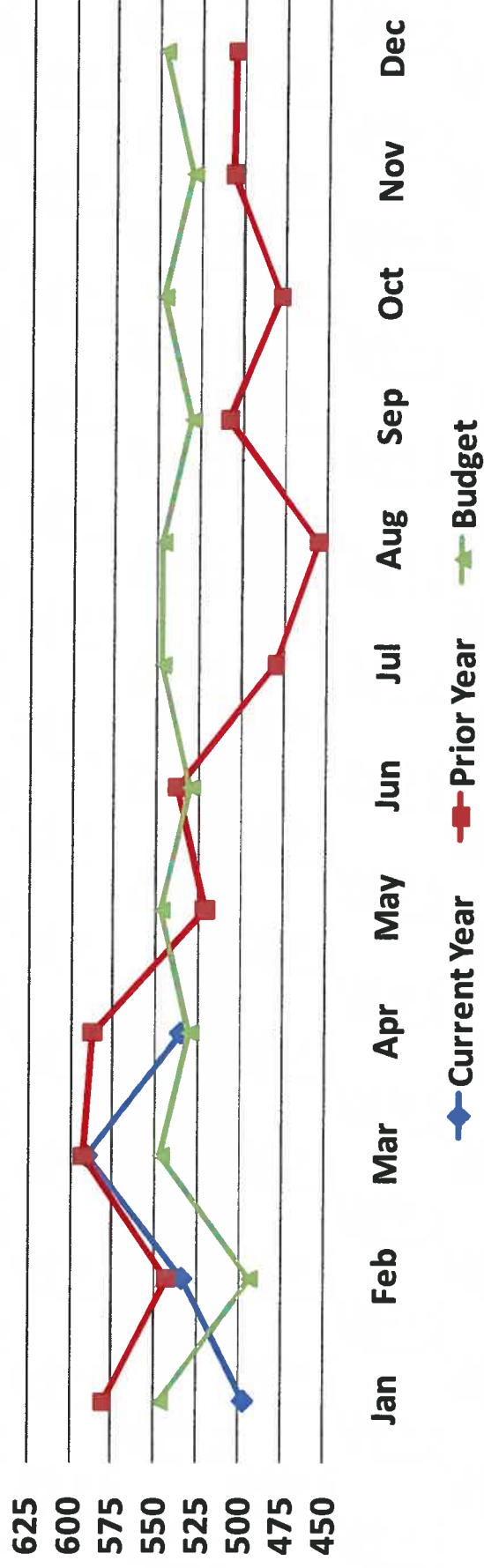
# Patient Activity For the Period Ending April 30, 2010

Actual M.T.D.	Budget M.T.D.	Variance		Actual Y.T.D.	Budget Y.T.D.	Variance
535	530	5	Inpatient Discharges	2,156	2,119	(37)
5,755	6,344	(589)	Outpatient Visits	24,423	25,992	(1,569)

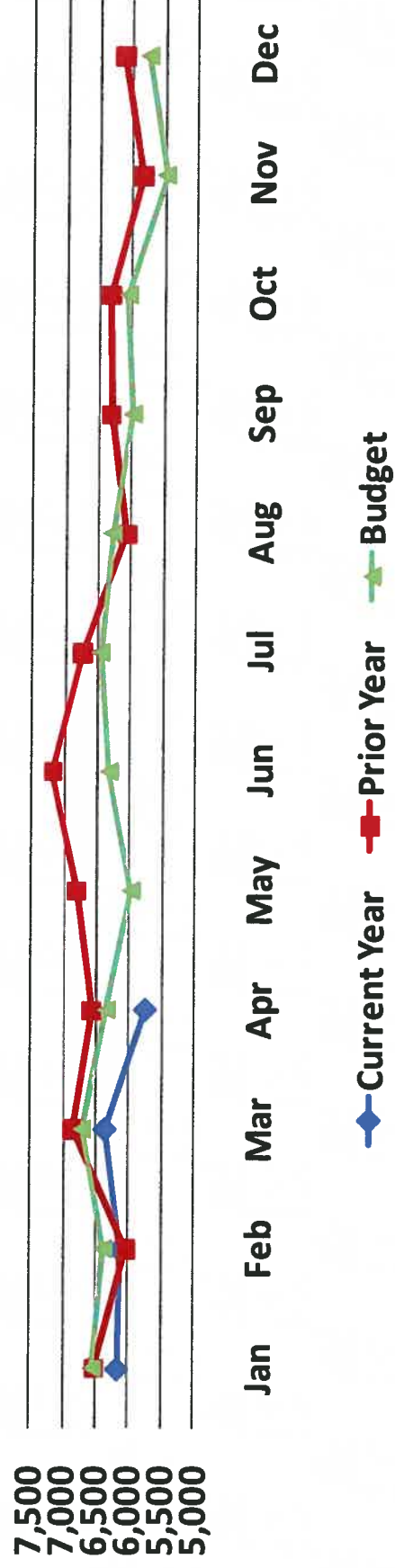
## Major Outpatient Contributor

2,433	3,067	(634)	Emergency Visits	11,983	13,246	(1,263)
\$4,128	\$4,255	\$(127)	Emergency Revenue (Dollars in Thousands)	\$16,351	\$18,376	\$(2,024)

## Inpatient Discharges



## Outpatient Visits





# Statement of Activity – Summary

## For the Period Ending

### April 30, 2010

*(Thousands)*

Actual M.T.D.	Budget M.T.D.	Variance		Actual Y.T.D.	Budget Y.T.D.	Variance
\$11,519	\$11,039	\$480	Net Operating Revenues	\$43,003	\$44,151	(\$1,148)
\$11,947	\$11,598	(\$349)	Total Operating Expenses	\$48,411	\$47,603	(\$808)
(\$428)	(\$559)	\$131	Income/(Loss) From Operations	(\$5,408)	(\$3,452)	(\$1,956)
\$2,063	\$2072	(\$9)	Income from Other Sources	\$9,474	\$8,285	\$1,189
\$1,635	\$1,513	\$122	Net Income/(Loss)	\$4,066	\$4,833	(\$767)
14.2%	13.7%	0.5%	Net Income Percentage	9.5%	10.9%	-1.4%
			California Benchmark Average	2.1%		
			Top 25%	7.1%		
			Top 10%	11.5%		

# Budget Variances – Net Revenue

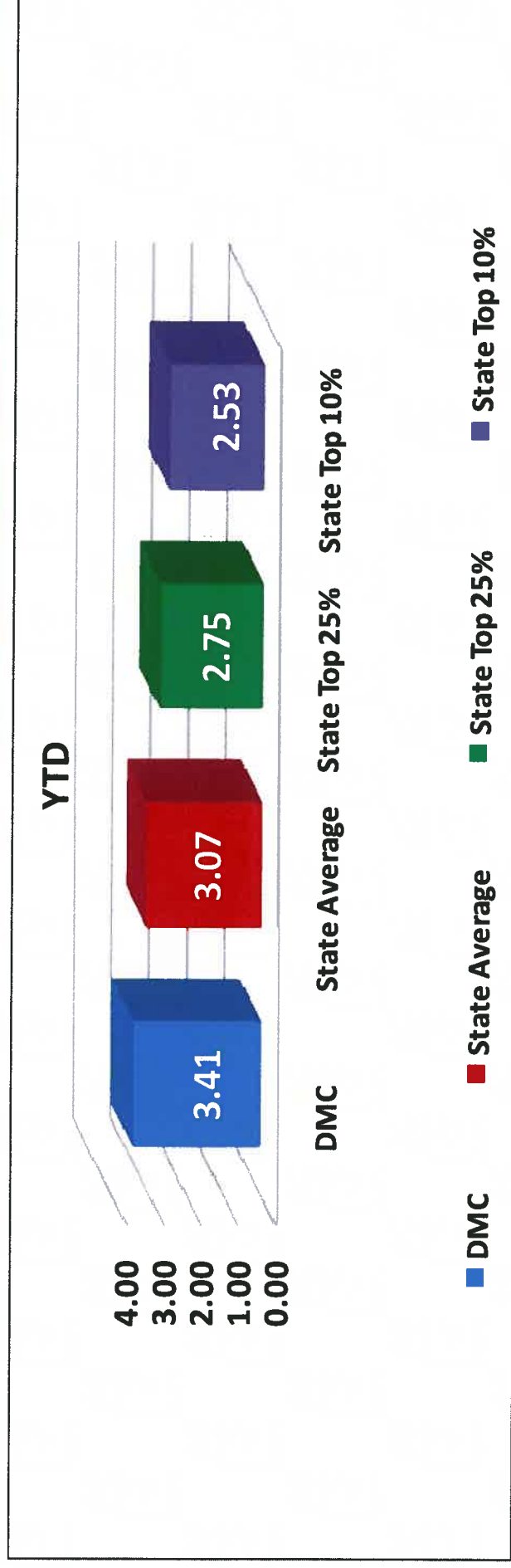
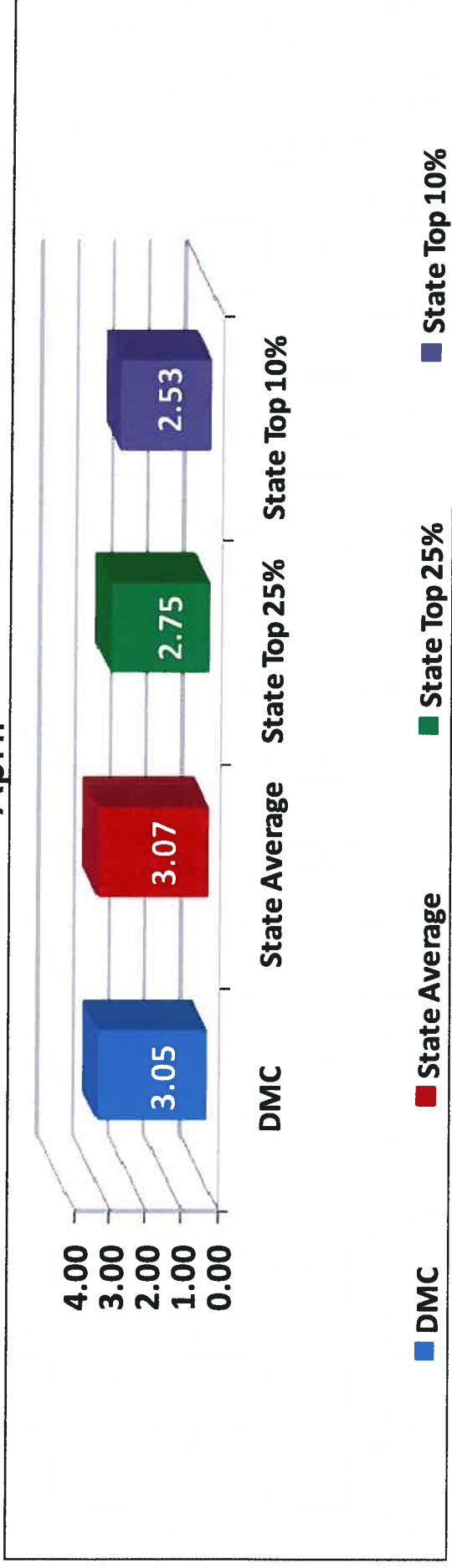
- Quarterly Payment Percentage Update – \$755,000
  - Average Charge per Inpatient Case is down from Budget by \$2,156 – Increase in Payment Percentage
  - Inpatient Charges down in
    - Respiratory Therapy
    - EKG
    - CT Scan
    - Laboratory
- Outpatient Revenue Down by 4.5% – (\$115,000)
  - Radiation Therapy & Emergency Room
- Self Pay Up – (\$105,000)

# Budget Variances – Expenses

- ▶ Salaries – (\$18,000)
  - Nursing Units Variance Budget by (\$32,000)
  - March Variance was (\$380,000)
- ▶ Supplies – (\$266,000)
  - Due to higher volume of Ortho Implants and Pacemakers
- ▶ Purchases Services
  - Repairs Variance was (\$29,000)
  - Dialysis Variance was (\$63,000)

# Length of Stay Comparison Adjusted For Case Mix Index

April





# Cash Position

## April 30, 2010

*(Amounts in Thousands)*

	April 30, 2010	December 31, 2009
Unrestricted Cash	\$11,222	\$7,666
Restricted Cash	\$6,167	\$5,363
Total Cash	\$17,389	\$13,029
Days Unrestricted Cash	28	21
Days Restricted	15	14
Total Days of Cash	43	35
California Benchmark Average	34	
Top 25%	82	
Top 10%	183	



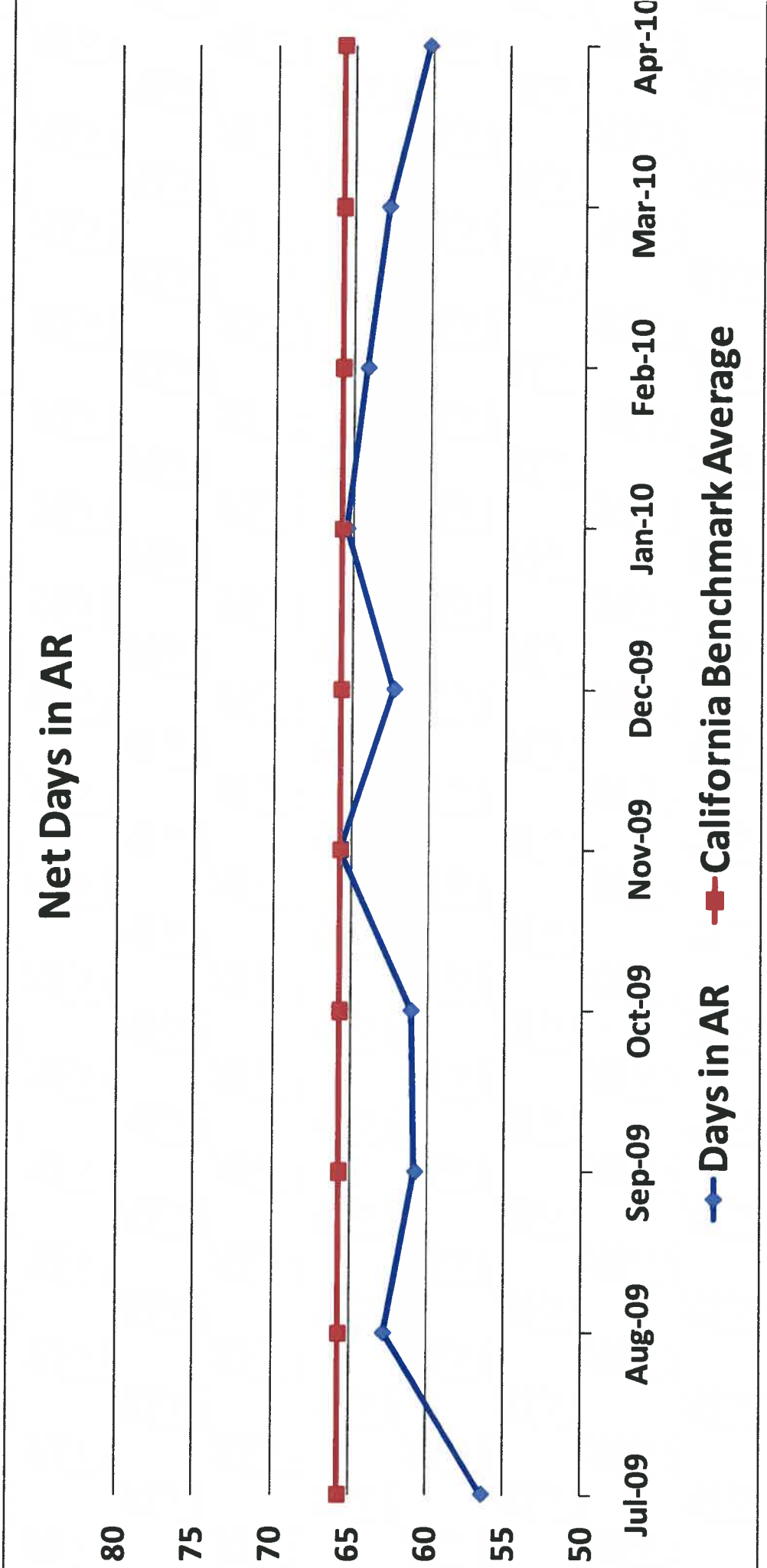
# Accounts Receivable

## April 30, 2010

*(Amounts in Thousands)*

	April 30, 2010	December 31, 2009
Net Patient Accounts Receivable	\$22,210	\$19,157
Net Days in Accounts Receivable	60.2	62.3
California Benchmark Average	65.7 days	
Top 25%	45.2 days	
Top 10%	35.5 days	

# Accounts Receivable



# Action Plan Update

- ▶ Identified over \$2 million in Revenue and Cost Reduction Opportunities
- ▶ Revenue Opportunities – \$950,000
  - Medicare 72 hour Rule – \$500,000
  - Increased Self Pay – \$250,000
- ▶ Cost Reductions – \$1,200,000
  - Attendance Policy – \$350,000
  - Reduce Overtime – \$250,000
  - Manage Agency Usage – \$225,000

# Questions



**WEST CONTRA COSTA HEALTHCARE DISTRICT**  
**DOCTORS MEDICAL CENTER**  
**INCOME STATEMENT**  
**April 30, 2010**  
(Amounts in Thousands)

	CURRENT PERIOD			PRIOR YEAR	
	ACTUAL	BUDGET	VAR	VAR %	ACTUAL
1	11,418	10,947	471	4.3%	11,007
2	101	92	9	8.8%	69
3	11,519	11,039	480	4.3%	11,076
<b>OPERATING REVENUE</b>					
Net Patient Service Revenue	42,687	43,780	(1,113)	-2.5%	42,286
Other Revenue	336	371	(35)	-8.4%	313
<b>Total Operating Revenue</b>	<b>43,003</b>	<b>44,151</b>	<b>(1,148)</b>	<b>-2.6%</b>	<b>42,599</b>
<b>OPERATING EXPENSES</b>					
Salaries & Wages	21,559	21,315	(244)	-1.1%	22,226
Employee Benefits	10,733	10,688	(47)	-0.4%	9,116
Professional Fees	3,333	3,124	(209)	-6.7%	2,876
Supplies	7,037	6,468	(569)	-8.7%	6,766
Purchased Services	2,736	2,812	76	2.7%	2,284
Rentals & Leases	576	492	(84)	-17.1%	363
Depreciation & Amortization	1,167	1,222	55	4.5%	1,133
Other Operating Expenses	1,270	1,484	214	14.4%	1,333
<b>Total Operating Expenses</b>	<b>48,411</b>	<b>47,803</b>	<b>(608)</b>	<b>-1.7%</b>	<b>46,097</b>
<b>Operating Profit / Loss</b>	<b>(5,408)</b>	<b>(3,452)</b>	<b>(1,956)</b>	<b>56.7%</b>	<b>(3,498)</b>
<b>NON-OPERATING REVENUES (EXPENSES)</b>					
Other Non-Operating Revenue	6,895	5,864	1,231	21.7%	4,500
District Tax Revenue	3,012	3,084	(72)	2.3%	3,050
Investment Income	39	33	6	18.2%	37
Less: Interest Expense	(472)	(498)	24	-4.8%	(535)
<b>Total Net Non-Operating</b>	<b>9,474</b>	<b>8,285</b>	<b>1,189</b>	<b>14.4%</b>	<b>7,052</b>
<b>Income Profit (Loss)</b>	<b>4,066</b>	<b>4,833</b>	<b>(767)</b>	<b>-15.9%</b>	<b>3,554</b>
<b>Profitability Ratios:</b>					
Operating Margin %	-12.6%	-7.8%			-8.2%
Profit Margin %	9.5%	10.9%			8.3%

**WEST CONTRA COSTA HEALTHCARE DISTRICT**  
**DOCTORS MEDICAL CENTER**  
**INCOME STATEMENT**  
**April 30, 2010**  
(Amounts in Thousands)

49	2,433	3,067	(634)	-20.7%	3,025	ED Outpatient Visits	11,983	13,246	(1,263)	-8.5%	11,494
50	3,228	3,172	56	1.8%	3,172	Ancillary Outpatient Visits	12,063	12,288	(225)	-1.8%	12,088
51	94	105	(11)	-10.5%	113	Outpatient Surgeries	377	458	(81)	-17.7%	418
52	<u>5,755</u>	<u>6,344</u>	<u>(589)</u>	<u>-9.3%</u>	<u>6,310</u>	<u>Total Outpatient Visits</u>	<u>24,423</u>	<u>25,992</u>	<u>(1,569)</u>	<u>-6.0%</u>	<u>23,988</u>
53	456	457	(1)	-0.2%	464	Emergency Room Admits	1,872	1,970	(98)	-6.0%	1,920
54	18.7%	14.9%			15.3%	% of Total E/R Visits	15.8%	14.9%			16.7%
55	85.4%	86.5%			81.5%	% of Acute Admissions	86.9%	93.2%			84.1%
56	622	614	8	1.4%	623	Worked FTE	617	633	(18)	-2.5%	613
57	692	693	(1)	-0.1%	694	Paid FTE	692	727	(35)	-4.8%	691
58	4.65	4.57	0.07	1.6%	5.46	Worked FTE / AADC	4.43	4.66	(0.23)	-4.9%	4.80
59	5.17	5.16	0.01	0.2%	6.11	Paid FTE / AADC	4.97	5.37	(0.40)	-7.4%	5.41
60	2,843	2,719	125	4.6%	3,230	Net Patient Revenue / APD	2,554	2,674	(120)	-4.5%	2,758
61	14,557	14,847	(290)	-2.0%	17,557	I/P Charges / Patient Days	14,094	15,140	(1,046)	-6.9%	15,871
62	3,373	3,205	169	5.3%	3,132	O/P Charges / Visit	3,026	3,160	(134)	-4.2%	3,194
63	1,283	1,285	(8)	-0.6%	1,728	Salary Expense / APD	1,280	1,302	11	0.9%	1,450
64	5.0	5.0	0.00	0.1%	3.9	Total LOS	5.3	5.2	(0.16)	-3.2%	4.55
65	1,643	1,563	(80)	-5.1%	1,563	Total CMI	1,566	1,504	(62)	-4.1%	1,504
66	3.05	3.21	0.16	5.0%	2.49	Total CMI Adjusted LOS	3.41	3.44	0.03	0.9%	3.02



## April 2010 Executive Report

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<b><u>Expenses</u></b>	
Supplies	(\$266,000)
Purchased Services	(\$110,000)

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**WEST CONTRA COSTA HEALTHCARE DISTRICT**  
**DOCTORS MEDICAL CENTER**  
**INCOME STATEMENT**  
**April 30, 2010**  
(Amounts in Thousands)

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2	101	92	9	9.8%	69
3	11,519	11,039	480	4.3%	11,076
<b>OPERATING REVENUE</b>					
Net Patient Service Revenue					
Other Revenue					
<b>Total Operating Revenue</b>					
4	5,193	5,175	(18)	-0.3%	5,891
5	2,517	2,526	9	0.4%	2,269
6	831	781	(50)	-6.4%	691
7	1,883	1,617	(266)	-16.5%	1,602
8	813	703	(110)	-15.6%	558
9	131	123	(8)	-6.5%	83
10	294	301	7	2.3%	314
11	285	372	87	23.4%	327
12	11,947	11,598	(349)	-3.0%	11,735
<b>OPERATING EXPENSES</b>					
Salaries & Wages					
Employee Benefits					
Professional Fees					
Supplies					
Purchased Services					
Rentals & Leases					
Depreciation & Amortization					
Other Operating Expenses					
<b>Total Operating Expenses</b>					
13	(428)	(559)	131	-23.4%	(659)
<b>Operating Profit / Loss</b>					
<b>NON-OPERATING REVENUES (EXPENSES)</b>					
Other Non-Operating Revenue					
District Tax Revenue					
Investment Income					
Less: Interest Expense					
<b>Total Net Non-Operating</b>					
14	1,416	1,416	-	0.0%	1,000
15	753	771	(18)	2.3%	763
16	11	9	2	22.2%	8
17	(117)	(124)	7	0.0%	(149)
18	2,063	2,072	(9)	-0.4%	1,622
19	1,635	1,513	122	8.1%	963
<b>Income Profit (Loss)</b>					
<b>Profitability Ratios:</b>					
Operating Margin %	-3.7%	-5.1%			-5.9%
Profit Margin %	14.2%	13.7%			8.7%

	CURRENT YTD			VAR %	PRIOR YEAR	
	ACTUAL	BUDGET	VAR		ACTUAL	ACTUAL
RES)	42,667	43,780	(1,113)	-2.5%	42,286	
	336	371	(35)	-9.4%	313	
	43,003	44,151	(1,148)	-2.6%	42,599	
	21,559	21,315	(244)	-1.1%	22,226	
	10,733	10,686	(47)	-0.4%	9,116	
	3,333	3,124	(209)	-6.7%	2,876	
	7,037	6,468	(569)	-8.8%	6,766	
	2,736	2,812	76	2.7%	2,284	
	576	492	(84)	-17.1%	363	
	1,167	1,222	55	4.5%	1,133	
	1,270	1,484	214	14.4%	1,333	
	48,411	47,603	(808)	-1.7%	46,097	
	(5,408)	(3,452)	(1,956)	56.7%	(3,498)	
	6,895	5,664	1,231	-21.7%	4,500	
	3,012	3,084	(72)	2.3%	3,050	
	39	33	6	18.2%	37	
(472)	(496)	24	-4.8%	(535)		
9,474	8,285	1,189	14.4%	7,052		
4,066	4,833	(767)	-15.9%	3,554		
-12.6%	-7.8%				-8.2%	
9.5%	10.9%				8.3%	

**WEST CONTRA COSTA HEALTHCARE DISTRICT  
DOCTORS MEDICAL CENTER  
INCOME STATEMENT**

April 30, 2010

(Amounts in Thousands)

22	1,920	1,913	(7)	-0.4%	2,395	SWB / APD	1,933	1,954	22	1.1%	2,044
23	64.5%	66.4%	(95)	-3.3%	69.5%	SWB / Total Operating Expenses	66.7%	67.2%			68.0%
24	2,975	2,880			3,444	Total Operating Expenses / APD	2,897	2,907	10	0.3%	3,007
25	39,041	39,447	(406)	-1.0%	40,066	IP Gross Charges	161,591	165,768	(4,177)	-2.5%	163,619
26	19,414	20,332	(918)	-4.5%	19,761	OP Gross Charges	73,898	82,126	(8,228)	-10.0%	76,652
27	<u>58,455</u>	<u>59,779</u>	<u>(1,324)</u>	<u>-2.2%</u>	<u>59,827</u>	<u>Total Gross Charges</u>	<u>235,489</u>	<u>247,894</u>	<u>(12,405)</u>	<u>-5.0%</u>	<u>240,271</u>
<b>Payor Mix (IP and OP)</b>											
28	39%	39%	0%		40%	Medicare %	39%	39%	0%		38%
29	17%	17%	0%		16%	Medi-Cal %	17%	17%	0%		16%
30	13%	15%	-2%		16%	Managed Care HMO / PPO %	14%	15%	-2%		16%
31	10%	11%	-1%		11%	Medicare HMO %	10%	11%	-1%		11%
32	7%	6%	1%		5%	Medi-Cal HMO %	7%	6%	1%		6%
33	0%	0%	0%		0%	Commercial %	0%	0%	0%		0%
34	2%	1%	1%		1%	Worker's Comp %	3%	1%	2%		1%
35	3%	4%	-1%		5%	Other Government %	3%	4%	-2%		4%
36	9%	7%	2%		7%	Self Pay / Charity %	9%	7%	2%		8%
<b>STATISTICS</b>											
37	534	528	6	1.1%	569	Admissions	2,154	2,113	41	1.9%	2,283
38	535	530	5	1.0%	587	Discharges	2,156	2,119	37	1.8%	2,302
39	2,682	2,657	25	0.9%	2,282	Patient Days	11,465	10,949	516	4.7%	10,441
40	89.4	88.6	0.8	0.9%	76.1	Average Daily Census (ADC)	95.5	91.2	4.3	4.7%	87.0
41	5.01	5.02	0.00	0.1%	3.89	Average Length of Stay (LOS)	5.32	5.17	(0.15)	-2.9%	4.54
42	30	30			30	Days in Month	120	120			120
43	801	803	(2)	-0.2%	877	Adjusted Discharges (AD)	3,142	3,168	(26)	-0.8%	3,380
44	4,016	4,026	(11)	-0.3%	3,408	Adjusted Patient Days (APD)	16,708	16,373	335	2.0%	15,332
45	134	134	(0)	-0.3%	114	Adjusted ADC (AADC)	139	136	3	2.0%	128
46	88	92	(4)	-4.3%	87	Inpatient Surgeries	360	404	(44)	-10.9%	376
47	94	105	(11)	-10.5%	113	Outpatient Surgeries	377	458	(81)	-17.7%	418
48	<u>182</u>	<u>197</u>	<u>(15)</u>	<u>-7.6%</u>	<u>200</u>	<u>Total Surgeries</u>	<u>737</u>	<u>862</u>	<u>(125)</u>	<u>-14.5%</u>	<u>794</u>

**WEST CONTRA COSTA HEALTHCARE DISTRICT  
DOCTORS MEDICAL CENTER  
INCOME STATEMENT**

April 30, 2010

(Amounts in Thousands)

49	2,433	3,067	(634)	-20.7%	3,025	ED Outpatient Visits	11,983	13,246	(1,263)	-9.5%	11,494
50	3,228	3,172	56	1.8%	3,172	Ancillary Outpatient Visits	12,063	12,288	(225)	-1.8%	12,086
51	94	105	(11)	-10.5%	113	Outpatient Surgeries	377	458	(81)	-17.7%	418
52	5,755	6,344	(589)	-9.3%	6,310	Total Outpatient Visits	24,423	25,992	(1,569)	-6.0%	23,998
53	456	457	(1)	-0.2%	464	Emergency Room Admits	1,872	1,970	(98)	-5.0%	1,920
54	18.7%	14.9%			15.3%	% of Total E/R Visits	15.6%	14.9%			16.7%
55	85.4%	86.5%			81.5%	% of Acute Admissions	86.9%	93.2%			84.1%
56	622	614	8	1.4%	623	Worked FTE	617	633	(16)	-2.5%	613
57	692	693	(1)	-0.1%	694	Paid FTE	692	727	(35)	-4.8%	691
58	4.65	4.57	0.07	1.6%	5.48	Worked FTE / AADC	4.43	4.66	(0.23)	-4.9%	4.80
59	5.17	5.16	0.01	0.2%	6.11	Paid FTE / AADC	4.97	5.37	(0.40)	-7.4%	5.41
60	2,843	2,719	125	4.6%	3,230	Net Patient Revenue / APD	2,554	2,674	(120)	-4.5%	2,758
61	14,557	14,847	(290)	-2.0%	17,557	I/P Charges / Patient Days	14,094	15,140	(1,046)	-6.9%	15,671
62	3,373	3,205	169	5.3%	3,132	O/P Charges / Visit	3,026	3,160	(134)	-4.2%	3,194
63	1,293	1,285	(8)	-0.6%	1,729	Salary Expense / APD	1,290	1,302	11	0.9%	1,450
64	5.0	5.0	0.00	0.1%	3.9	Total LOS	5.3	5.2	(0.16)	-3.2%	4.55
65	1,643	1,563	(0.08)	-5.1%	1,563	Total CMI	1,566	1,504	(0.06)	-4.1%	1,504
66	3.05	3.21	0.16	5.0%	2.49	Total CMI Adjusted LOS	3.41	3.44	0.03	0.9%	3.02